HOUSE HEALTH AND GOVERNMENT AFFAIRS COMMITTEE SUBSTITUTE FOR HOUSE BILL 239

49TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2009

AN ACT

RELATING TO HEALTH INSURANCE; REQUIRING THAT HEALTH COVERAGE
OPTIONS FOR CERTAIN STATE AND LOCAL PUBLIC EMPLOYEES AND THEIR
COVERED DEPENDENTS INCLUDE COVERAGE PURSUANT TO THE MEDICAL
CARE SAVINGS ACCOUNT ACT; REQUIRING THAT HEALTH COVERAGE
OPTIONS FOR INDIVIDUALS INSURED BY THE PUBLIC SCHOOL INSURANCE
AUTHORITY AND THEIR COVERED DEPENDENTS INCLUDE COVERAGE
PURSUANT TO THE MEDICAL CARE SAVINGS ACCOUNT ACT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. A new section of the Group Benefits Act is enacted to read:

"[NEW MATERIAL] HEALTH COVERAGE REQUIREMENT--MEDICAL CARE SAVINGS ACCOUNT.--

A. Beginning with the open enrollment period for the 2010 plan year, the risk management division of the general .176670.1

services department shall offer to employees and their covered dependents the option of receiving health care coverage through a high-deductible plan in conjunction with a medical care savings account pursuant to the provisions of the Medical Care Savings Account Act. The employee or covered dependent shall present evidence, in a manner that the risk management division has prescribed in rules established pursuant to Subsection B of this section, that the employee or covered dependent has established a medical care savings account in compliance with the Medical Care Savings Account Act and any rules that the risk management division has promulgated pursuant to that act.

- B. The group insurance contributions of the state as well as employee contributions shall be made in equal proportions to the high-deductible plan and to the medical care savings account at a rate equaling the total premium cost of the lowest-cost major medical group health coverage option otherwise available to employees, provided that these contributions meet the contribution requirements pursuant to Sections 10-7-4 and 22-29-10 NMSA 1978.
- C. The risk management division of the general services department shall promulgate rules for the administration and implementation of this section.
- D. As used in this section, "covered dependent" means an individual who is eligible for coverage pursuant to the provisions of the Group Benefits Act on the basis of the .176670.1

individual's relationship to an employee."

Section 2. A new section of the Public School Insurance Authority Act is enacted to read:

"[NEW MATERIAL] HEALTH COVERAGE OPTION REQUIREMENT-MEDICAL CARE SAVINGS ACCOUNT.--

A. Beginning with the open enrollment period for the 2010 plan year, the authority shall offer to all subscribers and their covered dependents the option of receiving health coverage through a high-deductible plan in conjunction with a medical care savings account pursuant to the provisions of the Medical Care Savings Account Act. A subscriber or covered dependent who wishes to opt for coverage pursuant to the Medical Care Savings Account Act shall present evidence, in a manner that the authority has prescribed in rules promulgated pursuant to Subsection B of this section, that the subscriber has established a medical care savings account in compliance with the Medical Care Savings Account Act and any regulations that the insurance division of the public regulation commission has promulgated pursuant to that act.

B. The group insurance contributions of the authority as well as employee contributions shall be made in equal proportions to the high-deductible plan and to the medical care savings account at a rate equaling the total premium cost of the lowest-cost major medical group health coverage option otherwise available to employees, provided that .176670.1

these contributions meet the contribution requirements pursuant to Section 22-29-10 NMSA 1978.

C. The authority shall promulgate rules for the

- C. The authority shall promulgate rules for the administration and implementation of this section.
 - D. As used in this section:
- (1) "covered dependent" means an individual who is eligible for health coverage offered by the authority due to the individual's relationship to a subscriber; and
- (2) "subscriber" means a public school employee, school board member, school board retiree or public school retiree participating in group health insurance offered by the authority."

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